Reshaping the Female Body: The Dilemma of Cosmetic Surgery. *By Kathy Davis.* Routledge, New York, 1995, 211 pp., \$19.99.

Reviewed by Winnifred B. Cutler, Ph.D. 1

Davis, a medical sociologist in the Department of Women's Studies at the University of Utrecht in The Netherlands, provides an extraordinary insight into a contemporary dilemma. Her book evaluates the situation both of women who choose cosmetic surgery and medical and sociology scholars who attempt to understand the forces that determine that choice. The outcome of surgery is described through the voices of some of the same women first interviewed before surgery and again 1 year later.

Davis' scholarly investigation began from the perspective of a feminist scholar enraged at "the horrors being perpetrated on women's bodies by the medical system" (p. 1). The systematic exploration, which Davis pursued, led her to a more moderate conclusion. She relays her own startled reaction as her feminist colleagues began confiding in her that they were seeking cosmetic surgery, in spite of former vocal opposition to it, and how this dialogue led to her decision to investigate this medical practice more deeply. Spanning a period of several years, her evaluation involved three empirical studies: an exploratory study, a clinical study, and field work. She investigates cosmetic surgery, sequentially exploring the perspectives of all involved covering a number of topics.

1. What women themselves have to say as they approach the medical establishment seeking surgery; that they seek surgery because they suffer from "being abnormal" and have this feeling reinforced by comments and experiences in their relationships with others. For example,

The problems were different—facial blemishes, sagging breasts, saddlebag thighs—but the language was remarkably similar. Each woman emphasized how ugly, awful, unaesthetic, or even dirty her particular bodily defect was. The vocabulary used vividly displayed the extent of her distress. Each depicted her body (or some part of it) as something which she could not possibly accept. Hated body parts were dissociated from the rest of her body as objects—"those things," "mountains of fat," "sagging

knockers." They were described as pieces of flesh which had been imposed upon her—inanimate and yet acting against her. They became something which each woman wanted to, literally, cut out of her life. (p. 74)

- 2. How the medical profession in The Netherlands attempts to evaluate the appropriateness of the surgical candidate against limited economic resources in a socialized medicine setting. Davis reveals that "even socialized medicine, with its discourse of need cannot solve the problem of whether and under what circumstances the surgical alteration of the body for aesthetic reasons can be justified."
- 3. The actual and almost universally humiliating experience that women have as they encounter the mostly male medical establishment. As women attempt to negotiate effectively to establish adequate need, based on their abnormal appearance, they are forced to expose their "abnormality" to the examination of strangers as they convince them of the suffering they have endured which led them to seek surgical alteration.
- 4. The lack of objective criteria that can be applied to what constitutes an abnormality. Not only has the Dutch medical system been unable to establish any objective criteria, Davis also finds that she can't either. Davis learns to her surprise that she is unable to predict what surgical alteration (nose? breast?) women are seeking as she observes successive applicants engaged with the medical examiner. As an accepted observer in the medical examining room, she has the opportunity to watch a series—up to 15 evaluations in a morning—and finds that the "abnormality" which brings the patient to seek surgical alteration is not obvious before the patient begins to articulate why she is seeking insurance approvals.
- 5. The reactions of family members, who in this sample have often not wanted the candidate to seek surgery and may support or discourage the search for surgery. Poignant stories are told of women who always felt themselves the unloved child, the ugly duckling, and who win the approval for surgical alteration, only to find themselves still the unloved one and still not considered attractive by others. Other stories—of women who long felt their breast size too small—produce jubilation at the change when the surgery went well and the husband who had objected to the surgery, now loved the outcome. Davis did not supply frequencies so the reader recognizes a variety of outcomes without knowing their likelihood.

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6. The surgical experience itself. The surgical patient experiences physical pain that is often severe and of long duration, undergoes a complex postoperative recovery, and achieves variable outcomes, which include improvements as well as permanent disfigurement leaving the patient much worse than before.

7. The judgment of the recently cosmetically altered women are almost always positive 1 year after their surgeries. Even in the face of permanent disfigurement induced by surgery, the patients overwhelmingly conclude that they are glad they did it. But stories are told that suggest this positive conclusion is due to having taken action to improve one's life rather than having a changed appearance. The stories that women tell vary, in their 3–6 hr post-surgical interview, as they have time to consider, reevaluate, and reconsider their overall experience. Often at the end of the interview, as the postsurgical patient is explaining her story for the fourth or fifth time, Davis comments that the patient is using the interview as a way of coming to terms with her own experience:

Diana gradually modifies her original assessment.... "You tend to think that people react to you because of your appearance. Well, I guess it does play a role.... in my case it just didn't make any difference. No difference at all. I mean, whether people liked me or didn't like me. Or whether I liked them. That all just stayed the same. Absolutely nothing changed. The only thing that changed were the superficial contacts. In the train, in the bus, on the street. That's all." (pp. 110–111, italics in original)

The overall goal women have in seeking surgery appears consistent in spite of the variety of procedures undertaken. To be ordinary rather than unattractive. And the stories Davis hears leads her to conclude that women overwhelmingly meet that goal in their surgical experience and post-surgical assessment.

8. The conflicting reactions of the various feminist factions as expressed at conferences and through published essays. The analyses of these form the final chapter of the book. Davis concludes with a rejection of the "politically correct" feminist position against surgery and states

Cosmetic surgery is not about beauty, but about identity. For a woman who feels trapped in a body which does not fit her sense of who she is, cosmetic surgery becomes a way to renegotiate identity through her body Cosmetic surgery is about morality. For a woman whose suffering has gone beyond a certain point, cosmetic surgery can become a matter of justice—the only fair thing to do. (p. 163)

As any act of scholarship should do, this book generates more questions than the work was designed to address. What subsequent investigations could add to her

presentation are actual data of incidence and frequencies of the phenomena that are explained. How large is the risk for a woman undergoing the breast augmentation (e.g., when they need to reposition the breasts to correct surgically induced asymmetry or remove hardened or leaking implants and fibrous scar tissue)? What percentage of the time does the surgical implant procedure cause the pathologies described in the text? How many women who express satisfaction at the 1-year postoperative interval would still feel satisfied with their decision at the 5-year interval? Women who undergo elective hysterectomy for benign conditions usually report satisfaction at 1 year but with increasing time thereafter discover side effects that change their view (Cutler, 1990). Are there alternative treatments that might equally produce equal benefits without the risks and pain of surgery? Are these outcomes different for surgical choices geared to reversing visible signs of aging versus choices geared to correcting a life-long view of the self as abnormal?

This work represents a gentle and respectful exploration. It is an extremely courteous inquiry into the subject of why women seek the surgery, what they have to say about their experiences, and how others who make judgments of these women react. It offers the reader a rather unique insight, gathered from hundreds of hours of active and nonpejorative listening to what people will say, when given hours to review their experience, to repeat their story often three or four times at the one interview and, in doing so, make sense of their own complex and evolving conclusions about these experiences.

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Freaks Talk Back: Tabloid Talk Shows and Sexual Nonconformity. *By Joshua Gamson.* University of Chicago Press, Chicago, 1998, 288 pp., \$15.00 (paperback).

Reviewed by Roger Libby, Ph.D.²

Gamson, a sociologist, reports an extensive qualitative study of television talk show treatments of sexual nonconformity in this engaging book. The emphasis is on gay, lesbian, bisexual, and transgendered topics. A three-pronged methodology was used to provide complementary lenses

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through which to understand guest and topic selection and the choreographing of each show to maximize sensationalism and biases. Producers and former guests were interviewed and Gamson was a participant—observer at actual talk show tapings. Using an ethnographic approach, extensive field notes were taken for later analysis. In addition, he did a content analysis of 106 hr of talk show tapes and 147 transcripts of shows. He also conducted 13 discussion groups with 79 audience members, making the study appear to have four methods, rather than three.

One in four producers agreed to be interviewed, reflecting some resistance to Gamson's documentation of the many distortions that interfere with a reasonable approach to nonconventional sexual issues. It is not clear how much this resistance colored his insights, but this reviewer has appeared on virtually all of the programs studied and the observations ring true. Producers are shown to come and go with utter fluidity. It would be fascinating to track producers, in part to see if those who attempt to treat a subject fairly are more likely to lose their jobs.

After writing letters to talk show producers, 20 producers and about 45 former guests were interviewed. Even though the number of interviews is relatively small, this study can be used to form tentative conclusions and to test hypotheses about talk show treatments in future research. It is not surprising that many producers would not cooperate. Producers are busy people and their jobs are always on the line. There is a high rate of movement from show to show with many producers for shows such as Donahue, Geraldo, Jenny Jones, Oprah, Sally Jessy Raphael, Jerry Springer, Montel Williams, and Jane Whitney, to name but a few shows included in the study.

Gamson details his methodology in an Appendix. He acknowledges that this is not a study presenting evidence according to strict academic conventions. He is determined to be balanced, thorough, and fair, and he succeeds in his determination. It is abundantly clear that he is empathetic to guests; however, his identification with his subjects does not compromise his analysis. He cites many references, and detailed footnotes are provided. In his Notes he refers readers to long lists of publications to obtain further information. This is beyond the call of duty and much appreciated by those wishing to research sex in the media.

The author explains that his use of "freaks" in his title and analysis "is meant to call attention to rather than reproduce the stigmatization of sex and gender nonconformists, and to complicate the notion that talk shows can simply be understood as freak shows" (p. 242). There is a keen awareness concerning the conflict between what guests wish to present and the staging of what they are allowed to say by producers. This is a fine study of pop culture and, as such, it contributes immensely to our un-

derstanding of the role of talk shows in brokering and defining sexual nonconformity of all kinds. Gamson cites related studies and he is relentless in his desire to be fair and accurate.

The Table of Contents is provocative: "Why I Love Trash," "The Monster with Two Heads," "Truth Told in Lies," "Sitting Ducks and Forbidden Fruits," and so forth. There are plenty of dirty little secrets here. As the host of a radio talk show on sex, this reviewer has interviewed Kate Bornstein, Michelangelo Signorile, and other authors included in this book. Once again, the author's insights coincide with this reviewer's experience on talk shows.

The author points out that talk shows are show business. They are intended to titillate and entertain. Many of the so-called sex experts have few, if any, credentials. Media-created "experts" are everywhere, showing how producers shape the motives and meanings of sexual acts. As Gamson states.

At the heart of this book, where sexual meaning-making, sexual politics, and the redrawing of key social boundaries meet up, are the *paradoxes of visibility* that talk shows dramatize with such fury: democratization through exploitation, truths wrapped in lies, normalization through freak show. There is in fact no choice here between manipulative spectacle and democratic forum, only the puzzle of a situation in which one cannot exist without the other, and the challenge of seeing clearly what this means for a society at war with its own sexual diversity. (p. 19)

To provide some flavor, two of Gamson's many observations follow:

Not surprisingly, same-sex relationships are not treated as simply equivalent to heterosexual ones..." (p. 64)

On nearly every talk show in which homosexuality makes a showing, some audience member stands up and mocks a guy named Steve. He is spoken of in dismissive, derisive tones, since he apparently receives no mention whatsoever in the Bible: "God made Adam and Eve," the mantra goes, "not Adam and Steve." (p. 107)

Gamson takes the point of view of the sex and gender outsiders that the shows exploit, but he is quick to say that freaks can and do exploit the media too. In this reviewer's opinion, the cesspool of the American talk show reflects pop culture at its worst. However, as Gamson notes, "One person's trash... is another person's gold mine" (p. 4).

This is a book worth reading for those wanting some documentation concerning talk show treatments of sexual nonconformists. One criticism is that the writing is at times dense and laborious, with some sentences and paragraphs extending far beyond a concise, clear style. In sum, this book should inform and provoke qualitative and quantitative studies of sex and the media.

Male Femaling: A Grounded Theory Approach to Cross-Dressing and Sex-Changing. *By Richard Ekins*. Routledge, London, 1997, 185 pp., £14.99.

Reviewed by J. Paul Fedoroff, M.D.³

Ekins sets out to present observations of several thousand cross-dressers and sex-changers made over a 17-year period. This is clearly a formidable task, so he appears to have selected "several hundred" informants and "several score (who) were followed up over a period of years." The details of the selection process and the follow-up procedure are not given. However, we do know that Ekins initially came into contact with his study population by answering a contact ad, frequenting drag bars, attending drag balls, cross-dresser support group meetings, and transvestite weekends at hotels. These activities and contacts led him to become the founder and director of the "Trans-gender Archive" at the University of Ulster.

Regretfully, the details of what the Archive contains and how the materials were obtained is not clearly spelled out. The Archive is supported by the "major 'transvestite' and 'transsexual' organizations throughout the world" and contains what Ekins describes as a "comprehensive collection of material on cross-dressing and sex-changing, and is the first public collection of its type in the world." The "informants" themselves are a varied group so Ekins coins the term "male femaling" to describe males who adopt "what they take to be the thoughts, feelings, attitudes, behaviors, accoutrements and attitudes of genetic females." It is Ekins' attempt to conceptualize these "male femalers" that is the subject of this book.

Ekins begins by proposing a "three-fold distinction that is absolutely central to the organization of (the) book": sex refers to biologic and physiologic differences between males and females; sexuality refers to "those matters pertaining to the potential arousability and engorgement of the genitals," and *gender* to the sociocultural differences between the sexes. In addition, he argues that male femalers can be divided into subgroups based on their "masked awareness" that refers to the degree that "they seek to display as females while hiding aspects of their male identities." The situation is further complicated by Ekins' theory that male femalers cycle through a series of five stages described as beginning, fantasying, doing, constituting, and consolidating. A large section of the book is devoted to the presentation of cases that illustrate these five stages.

Data concerning the "beginning femaling" phase are derived from informants' recollections. Although Ekins is appropriately cautious about the retrospective accounts his informants provide, he concludes that "though its meaning may change over the years, particular 'firsts' are often recalled with great clarity." Unfortunately, there is no discussion of the widely recognized tendency for "male femalers" to present what they think their clinicians want to hear, particularly when seeking approval for sex reassignment surgery.

The next phase involves "fantasying femaling" in which simple behaviors are charged with meaning. On the basis of a review of "over 200 male femaling telephone scripts . . . supplemented with information obtained from unstructured interviews with over 30 telephone sexline producers and consumers," Ekins identifies three major themes that he names "temptress," "sadomasochistic," and "intimacy" scripts. Temptress themes involve "a limited role reversal in a stereotypically erotic situation. The female narrator assumes certain facets of the male role. in order to feminize the caller." Sado-masochistic scripts as defined by Ekins involve scripts in which the "tones adopted by the narrators . . . are dominant and bullying until the protagonist is feminized." Intimacy scripts involve themes in which "the emphasis is upon close familiarity with women, and tones are sweet, friendly and confiding." Surprisingly, there is no mention of the panoply of "scripts" available on the Internet. There is also no description of how these three themes were identified as the major ones or whether they are mutually exclusive. For example, there may be considerable overlap in the men interested in both temptress and sadomasochistic scripts.

"Doing male femaling," as the name suggests, concerns the progression from fantasy to action. Ekins suggests that this phase can itself be divided into a primary and secondary phase. Primary doing involves activities in which the male femaler does things "without really quite knowing what he is doing." Secondary doing involves actions in which the "femaler...has come to know some modus vivendi and modus operandi for what he is doing and is freer to develop his personal doing style." The distinction between primary and secondary "doing" raises the question of when female emulation activities are not male femaling activities? Unfortunately, Ekins does not address this question, particularly in light of the fact that other researchers have found that male cross-gendered behaviors are better predictors of homosexuality than of transsexualism. Attention is also given to the related issues of disclosure and "dyadic doing" (male femaling with others) but again, there is a surprising neglect of the extensive discussion of these topics from the literature on the "coming out" process for gay men.

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"Constituting male femaling" refers to the selfreflective process of assigning meaning to the previous stages of male femaling. The writings of Daniel Schreber, made famous by Freud, are presented as an example of a "lone male femaler constituting a meaning from his own imaginary and private world." This is followed by the description of a "transvestite" who is "cured" by psychoanalysis. A third case describes a "transsexual" who runs into conflict with a psychiatrist who insists on a 2-year "real life test" before prescribing female hormones. Next is a more lengthy review of the correspondence between a male femaler and an advice columnist for a magazine catering to people with interests in this area. Ekins concludes this section with the comment, "It is often puzzling to those with no intimate appreciation of the lives of crossdressers and sex-changers why so many of them spend so much time engaging in what might be seen as a kind of obsessive taxonomising."

In spite of the impressive categorization of stages in Ekins' proposed "ideal-typical career path of the male femaler," some readers may be tempted to ask the same question of Ekins. The final stage of the "career path" is labeled "consolidating femaling." This refers to "the stage where a more full-blown constitution of femaling self and world is established." Here, Ekins describes three major patterns: "aparting," "substituting," and "integrating." For this section of the book, he presents summaries of three 2-hr interviews from three informants who were invited to "present a chronological account of their lives as cross-dressers and/or sex-changers." The case of Tom, the "aparting transvestite," is used to illustrate a man who keeps his cross-dressing private and separate from his public life. Gail, "the substituting transsexual," is used to present the course of a man who becomes progressively more public about his male femaling to the point that he loses his family and job. Then, with money obtained from a legal suit against his former employers for wrongful dismissal, undergoes sex reassignment surgery. Subsequently, he adopts public life as a woman while progressively becoming more secretive about his past life as a man. Phaedra, the "integrating gender transient" provides details about the advice columnist referred to above who has adopted a public presentation not as a man or woman but as a male femaler.

The subtitle of this volume refers to a "method of research which demands intimate appreciation of the area studied, but which writes up that intimate appreciation in terms of theoretical analyses." It has been described in detail by Glaser (1995), but the descriptions of its strengths and weaknesses do not get any clearer in Ekins' book than the one in the preceding sentence. Given the central importance that this "research methodology" has had on

Ekins' approach, it is a pity that a chapter on "grounded theory" for readers who are unfamiliar with the nuances of postpositivism, symbolic interactionism, structuration theory, and double hermeneutics was not included.

Readers should be aware that this book deals with a subsample of the universe of people who cross-dress or sex-change. There is no mention of females who engage in "female maling," intersex conditions, paraphilias, or other sociocultural sex-changing conditions, such as the berdache or Hijra; and almost nothing on sexual orientation and its relationship with male femaling. There is absolutely no quantitative analysis. Even specifics about how many people are included in qualitative analysis are not provided. In the prologue, Ekins writes, "In the course of...mutual exchange I have earned the confidence of the transgender community. I trust that this book will enable me to maintain that confidence and further develop mutual exchange." Although this sentiment may be laudable and necessary for the director of the Trans-Gender Archive, I worry that it may compromise the objectivity of even the most impartial theoretician. The conceptualization of males who emulate female characteristics has been problematic for clinicians. The assistance of scholars like Ekins in making sense of this complex and fascinating field of human behavior is surely welcomed. And yet, I couldn't help feeling that a tremendous source of information about male femalers has been squandered. If the data from the several thousand cross-dressers and sexchangers made over a 17-year period had been collected systematically and analyzed using quantitative techniques, this would have been a landmark study. Instead, this work provides a tantalizing but ultimately frustrating glimpse into the lives of men who remain as enigmatic as ever.

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Bert & Lori: The Autobiography of a Crossdresser. *By Robert J. Rowe.* Prometheus Books, Amherst, New York, 1997, 388 pp., \$26.95.

Reviewed by Michael A. Gilbert, Ph.D.⁴

There are a number of reasons for writing an autobiography. The first and foremost, of course, is that one has

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led a remarkable life rich with accomplishments and excitement. Another is that one has led an exemplary life or an unusual life. One might even write an autobiography because one has unique and worthwhile insights into what most would consider a perfectly ordinary life. Sadly, none of these apply to "Bert," the pseudonymous author of this book. In fact, it is very difficult to understand why anyone would imagine the life that "Bert" describes to be of any interest to anyone at all.

Surely, you ask, completely appalled at my negativism, learning about the life of a typical cross-dresser, understanding how he deals with the trials and travails of cross-dressing would be of value to students of human behavior. And, indeed, that may well be true. But this book is not about that. This book is a sort of "Revenge of the Nerd" undertaking. Its real subject matter is not how cross-dressing, be it a burden or a joy, shapes and fits into someone's life; the real subject matter is getting revenge on past loves and explaining in excruciating detail how "Bert" was right and his first girlfriend, first wife, various other girlfriends, father, brother, and all the rest of you were wrong. Trust me, if you dated "Bert" more then once you're sure to be indicted in this self-serving diatribe.

"Bert" has little to say about cross-dressing and everything he does say is second hand. You see, "Bert" has never cross-dressed outside his house or backyard. He has never worn makeup (in fact, I'll bet he has a beard) walked a pavement, gotten in or out of a car, or done anything that could be called exploring his cross-dressing. He has read books that are quoted and considered at various points in the text. Why we are to assume that "Bert" knows anything about his subject is never revealed to us. In fact, nothing is ever revealed to us. "Bert" not only uses a pseudonym, but also disguises his university (we only know that it is a "major research institution"), his calling (he says he is in art, but that is not likely), the identity of everyone he attacks, and the only person he does not attack, his current wife. In other words, this is actually a work of fiction.

There is one and only one worthwhile observation arising out of this book and that one occurs at the metalevel. What is worthwhile noticing is not "Bert," but his abject fear, guilt, and shame. His hiding his identity to such an extraordinary degree is witness to his own feelings about his cross-dressing and his projection of what others will think. He is obviously convinced that people will study the text to try and figure out who he is and embarrass and humiliate him. That fear governs his life and illustrates to us just how deeply closeted and craven an innocent fetishistic cross-dresser can be.

Fetishism is the brand of cross-dressing to which "Bert" subscribes. He disdains theories that purport to bring a man into closer touch with his "inner feminine

self" and sees his cross-dressing in "girl's" clothes as basically a sexual drive. This is not surprising given that all "Bert's" feminine life takes place in the fantasy world of his imagination and transvestite erotica. There is no avenue for, or possibility of, socialization and its consequent growth when there is no public life. Going to clubs, becoming involved in meetings, activity in organizations, and attendance at residential events leads one inexorably to question and to grow. Learning, for example, that one is never going to be truly beautiful and that that is all right is something many women must accept and when a cross-dresser accepts it he learns something not only about himself, but about being a woman as well.

I am afraid I cannot recommend this book and cannot even understand how it came to be published. In his brief preface, Bullough suggests that "Bert" is typical of modern day cross-dressers. I believe this is untrue. In fact, I think (and hope) that "Bert" is at an extreme that is increasingly diminishing in numbers, a kind of cross-dresser who would never have ventured out to one of Virginia Prince's clandestine gatherings in the 1950s. I believe that "Bert" is a dying breed who permit internalized guilt and shame to rule their lives and limit their choices. An autobiography of such an individual, especially one whose first agenda is to set the record straight on his previous relationships, is not one from which someone will grow.

As much as it grieves me to write a negative review, this book has (obviously) angered me. Insofar as it purports to represent the autobiography of a cross-dresser, it places "Bert's" transgender activities at the fore of his existence and makes of him a representative. I know numerous cross-dressers and am one myself and none of them is anything as hidden and narrow as "Bert." Yes, of course, if they are as hidden as he I could not know them. But "Bert" used his cross-dressing to get this book published when he has nothing to say and nothing to offer. This book offers the reader no useful insights into anything other than a prosaic life of anger and guilt.

Crossing: A Memoir. *By Deirdre N. McCloskey.* University of Chicago Press, Chicago, 1999, 266 pp., \$25.00.

Reviewed by Michael A. Gilbert, Ph.D.⁵

When Deirdre McCloskey was born, a male child, Donald McCloskey, entered the world and began on the road of life. Donald was to be bright, handsome, and athletic. He

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grew to a broad shouldered six feet, with his only oddity being a stutter. He succeeded at school and graduated from Harvard University, going on to make a major name for himself in academic economics as a conservative free market theorist. He married, had two children, and led an apparently normal, successful, and happy upper-middle class existence.

Only Donald's wife knew that he was a life-long cross-dresser, but as long as he kept it to himself and was very discreet, it was nothing she couldn't handle. He was completely closeted, and only in the summer of 1994, when the last child had left home for university, did he begin to dress more often and, at least at home, more openly. Discovering the Internet and the large and far flung transgender community led to his first contacts with other cross-dressers and the discovery of vast resources on his "condition." Suddenly, Donald was part of a community with its own literature, mores, conventions, and even erotica.

Donald then began a more active cross-dressing life. He used his university conference travel to connect to transgender conventions where, for the first times, he could go out in women's clothing, interact with people as his woman-self, and meet and make friends who were like him. His wife had more difficulty with this than he thought fair: After all, he was still discreet, only doing things away from home and on his own time. He did not leave from or arrive at home cross-dressed and was satisfied to pursue his activities at a distance or, when at home, behind drawn shades. But it was more then he was doing before and that was what frightened his wife.

Most cross-dressers' wives harbor a deep anxiety about the extent of their husbands' cross-sexuality. Many spouses considered within the "tolerant to mildly supportive" range have a secret fear that their husbands are really transsexual, and that one day it will explode, and then their marriage, as they know it, will be over. As cross-dressing men grow older, they frequently show less and less patience for the limitation in which they have so far existed. Most have led good, productive, and responsible lives, and begin to feel that they deserve more freedom, more understanding. Age brings with it an increased awareness of the fleeting nature of life, of the meaninglessness of doing what you ought do when what you want to do is harmless and right for you. As cross-dressers' wives watch their husbands mature, expand their activities and horizons, the fear that they will one day announce their transsexuality festers and grows. What will be enough? What will be the end?

The catastrophic end, from McCloskey's wife's point of view, is exactly what happened. After roughly 9 months of his new, extended life as a cross-dresser, Donald had an epiphany: I am a woman. "That's what the cross-dressing since age eleven had been about, closeted over four

decades, confined within marriage. And the open dressing in clubs and at home during the eight months past, more and more. The womanhood was there beneath the surface and yearned to take form." Thus was born Deirdre. And this book is the telling of the arduous, painful, frightening, and enlightening journey she commenced with that life shattering insight.

Crossing is an insightful and honest book that describes the feelings and conflicts Deirdre both endured and precipitated. Throughout, there is a heavy emphasis on the role that relationships played both in encouraging and discouraging her conversion from Donald to Deirdre. There are really four interrelated themes. The first is how love is never enough to sustain marriage and family, the second concerns the politics of gender changing, and the third, the sweetest, is about friendship. The fourth concerns "passing," its politics and dynamics, but space permits me to comment only on the first three.

In the preceding paragraphs, I intentionally projected from McCloskey's wife's point of view, because it is important to understand the enormity of the situation as it was for her. Understanding Deirdre's story also requires us to understand her family's. For many married transgendered people, changing gender means changing your role in your family's life, sometimes in such a fundamental way that there may be no room for you. One ceases to play the role assigned by the bipolar gender system and governed by the heterosexual matrix under which it operates. Mothers become fathers, fathers become aunts, husbands become—what? Girlfriends? Lesbian lovers? Neither of those was a choice made at the altar by the traditional blushing bride and proud groom all those years ago. It is not surprising that the move to transsexuality not infrequently engenders a great deal of anger and hostility from the crosser's partner.

That it does not surprise does not mean it is not sad. It is a sadness because the gender crosser (to use McCloskey's term) is not making a choice to be a man or a woman. The gender crosser is a man or is a woman even if not birth-designated that way or if not having lived that way all "hir" life. The gender crosser is only making a choice to survive; it is very simple: A transsexual denied will die—always spiritually and often physically. So the choice comes down to life or family, and from the crosser's point of view there's no reason not to have both. Deirdre, having acquired the certainty of her true sex, could no more live as Donald than she could live as a Holstein cow. She was not a man and could not live as one. But in coming into herself, Deirdre lost her wife and children who, as yet 4 years later, still remain deeply estranged. She dreamed of acceptance, of being understood and allowed to play an ongoing familial role, but was, is, denied that.

McCloskey shows great sympathy for her grieving family. After all, it took her 40 years to arrive at the decision that her family needed to accept or reject in a very short time. The urgency one feels upon reaching that kind of decision leaves little room for patience or trial runs or wait-and-sees.

Why then did Deirdre join the women's tribe? The question does not make sense, because it asks for a prudential answer when the matter is identity. Choice of a holiday in Indonesia rather than Australia can be explained with "I like Indonesian food better" or some other appeal to prudence, taking care, getting what you want. You are prudent, though, within an identity fixed on some other grounds... Asking why a person changes gender is like asking why a person is a midwesterner or thoughtful or great souled: she just is. (p. 177)

The successful lawyer who decides he is giving it all up to make toys out of apples, the stay-at-home mum who moves out for a lesbian lover, or anyone who is suddenly throwing over what they see as the shackles of a false life must expect that others will, in fairness, need time. McCloskey's book is honest enough that one can feel more than her point of view even while sharing her pain.

The second theme, which involves components of the first, concerns what McCloskey had to go through in order to pursue her dream of being herself. As we live in a world where gender is writ in stone from that first birth declaration, there is nothing so bizarre as trying to change it. This means that there are myriad obstacles placed in the way of gender crossers: Everything from changing your name to receiving the surgeries that will make your life safe and complete is difficult and requires consent from people who have no obvious reason to be meddling in your affairs. The gatekeepers (medical, bureaucratic, and legal) do everything in their power to prevent people from crossing from man to woman or woman to man. The immutability of the original decision is sacrosanct and no one will go from one to the other without crawling and begging. You can get a nose job, 10 face lifts, breast enhancements, have your tummy tucked, eyes done, and even have your genitals made more attractive as long as you can afford it, but don't think you can change your "natural" sex without a fight. The gender defenders will stop you.

In McCloskey's case, the gender defenders had an ally, someone who became Deirdre's sinister nemesis, attempting to pull strings and maintain control of her life from afar, by the simple mechanism of abusing the legal and bureaucratic gender protection systems. This dark force was none other than her own sister, a psychologist at Harvard, and she played a major role in planting almost insurmountable roadblocks in her way, including assisting in the alienation of her family. Twice Deirdre's sister

organized her involuntary commitment in mental institutions on grounds of alleged mania and consistently tried to prevent Deirdre's doctors from proceeding with scheduled operations by threat of legal action. In the end, dear sister cost Deirdre no less than \$25,000 in legal and other fees.

Imagine, if you will, sitting at a conference where a panel of three speakers has been organized to honor your work. You are still presenting as a male, but, indeed, plans are underway for certain limited cosmetic surgeries to prepare your transition to female. In the midst of the proceedings, while you are perhaps basking in the respect and professional authentication emanating from your colleagues, two huge policemen insist you come outside with them. Once there they cart you off to a mental institution where you must, above all, remain calm and polite lest you be considered unstable or uncooperative. Deirdre's sister used a wily combination of her professional influence and the American medical establishment's terror of legal proceedings to twice have her brother committed as well as scaring off various doctors and practitioners. The story, as one realizes that it could happen to anybody over anything, is nothing less than terrifying.

McCloskey raises pointed questions, not only about the particular difficulties she incurred, but about the nature of the gender protection system itself. The idea that there is something so much more profound and fundamental about having sex-reassignment surgery (SRS) than a gall bladder, nose job, face lift, or hair transplant contains within it many deep philosophical and political assumptions that go unquestioned.

People are haunted by the worry that "he'll change his mind." It doesn't happen any more than changes of mind over gallbladder operations, but people worry nonetheless. It's something they would darn right change their minds about—they can't conceive of anyone's wanting such a bizarre thing in the first place. It's craaazy. Weird. The gender crosser must be nuts, they reason. Make him wait: he'll snap out of it. (p. 190)

The chosen guardians are medical doctors and psychologists, even though there is nothing life-threatening in the procedures and there is no correlation between someone wanting SRS and actually being mentally disturbed. McCloskey points up, through the pain and difficulties she endured, the need for a rethinking of these procedures that begin at their roots with an analysis of the foundational assumptions that put gender reassignment in a class completely by itself.

While Deirdre, to her everlasting grief, lost her marriage family, she discovered many friends. In particular, she discovered the kinds of friendships that women form and the meaning that lay within them and that discovery and learning forms the third theme of the book. Women's

concern for each other, their demonstrations of affection and thoughtfulness, from remembering special days to little gifts to hospital visits, showed her clearly the differences between the masculinity from which she was fleeing and the femininity that she knew was right for her to embrace. Some of the most interesting insights McCloskey has to offer come when she is considering the differences between her previous sex and her new one, and watching her learn, watching her pick up the subtleties and nuances is itself a lesson in gender ideology.

Seeing McCloskey move from the brash, aggressive male academic economist she once was to the compassionate and concerned woman she became is to watch a fascinating progression. There have been, in recent years, any number of books detailing the differences between the way men communicate and interact and the way in which women do that. Deirdre, upon going full time, suddenly had to acquire the skills and techniques natural to the "other" gender. Such a socialization can only take place when interacting among women, especially among women who are supportive and friendly and willing to help. When one indicates an openness coaching is often available. (My own experience is that supportive women treat, at least, cross-dressers, more or less like young girls who are in need of guidance and teaching. "Do you really think, dear, that you want that blouse with that skirt?" "Wouldn't you feel better if you sat up straighter, dear?") This coaching is just what Deirdre needed and she was an apt pupil.

Learning to integrate naturally is not easy: What one has to learn involves the rules for interacting with the different genders from the opposite perspective, and how to do so in different circumstances—social, academic, professional, medical, and so on. When men begin treating you like a woman it is both complimentary because you are passing, and instructive because you are seeing the world from the other side of the fence. (e.g., I learned very quickly that when cross-dressed at an academic conference I had to introduce myself to male colleagues with my credentials if I was to be paid attention. As a man, it is enough to present my name; as a woman, I need to include my status.)

McCloskey's entry into the "tribe of women" begins with an epiphany, moves into high gear with an economist's sense of planning and drive, stumbles against major obstacles, and finally settles down, in Holland, for actual living. It is in that period that Deirdre discovers herself and her womanness, largely through her interaction with other women who surround her with support and confirmation. When she is with them, passing (the fourth theme of the book) becomes less important because they forget what she was and accept who she is. While on the

street or in the classroom, there is always a sense of being judged; among friends, one can simply be. Then learning and discovery can take place.

This is a book that is well worth reading both to learn about one person's struggle to be herself and to watch the unveiling of the gender dichotomies in all their subtlety from an insider's seat. *Crossing* may well incarnate the nightmare of a cross-dresser's spouse, but it also shows us how we internalize and reify sex and gender distinctions that then turn around and rule our lives. Freedom should be easier, and if it were, the nightmare might well disappear.

A Stranger in My Own Body: Atypical Gender Identity Development and Mental Health. Edited by Domenico Di Ceglie (with David Freedman). Karnac Books, London, 1998, 338 pp., £24.95.

Reviewed by Lawrence E. Newman, M.D.⁶

It has now been more than 45 years since John Money (who provides a foreword to the volume) first developed a research program to determine the role of rearing in the development of the then newly minted concept of "gender role." During the same period of time, Harry Benjamin described a program of humane treatment for transsexualism and Evelyn Hooker described her first studies indicating that homosexuality was not, per se, indicative of mental health problems. In the years since, this groundbreaking work has been followed by the steady accumulation of knowledge about atypical gender identity and role development. This excellent new edited volume reflects our present understanding of a wide range of work carried out by clinicians and researchers. Most of the chapters are based on papers presented at a November 1996 conference held at the Tavistock Centre in London, with a few other original contributions concerning gender identity development in children and adolescents. I will highlight some of the areas that I believe reflect new thinking of special importance to clinicians.

The section entitled "Children of Transsexual Parents" contains three important chapters. The first, by Green, updates his earlier work and further extends our understanding that, properly counseled, these children are not negatively affected even by such a dramatic development as the sex reassignment of a parent. Nor is there any evidence of an effect on their own gender identity formation. The next two chapters by Di Ceglie and Lightfoot set forth principles of management.

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Another section regarding developmental patterns in homosexuality, transvestism, and transsexualism and their mental health implications contains a uniquely important new contribution regarding the treatment of transsexualism in adolescents by Cohen-Kettenis, van Goozen, and Cohen. Here the authors describe the treatment of adolescent transsexuals with hormonal therapy to prevent unwanted pubertal development. In the usual clinical approach, hormonal treatment beginning the sexreassignment process does not begin prior to 18 years, so that clinicians can be certain that the patient's desire for sex change is constant and irreversible. In fact, it is a general clinical experience that patients often despair during the middle teen years as puberty changes their bodies in ways that they hate. The revolutionary and heroic approach described here is worth studying by every physician concerned with the care of these youngsters. The excellent chapters by Bradley, regarding adolescent transvestism, and Tasker, describing a clinical approach to the comingout experiences of homosexuals in adolescence, are also in this section.

I enjoyed the chapter about social anthropology and atypical gender identity in childhood. James discusses the fascinating cross-cultural experience with atypical gender. The Inuit of the Arctic may deliberately rear children from infancy on as members of the opposite sex. Some boys may be raised as girls and vice versa in order to reincarnate a dead child or relative because the parents wanted a child of the opposite sex for practical reasons. Sometimes the cross-sexed upbringing ends at puberty. But, in other cases, individuals may retain their cross-sexed identities for their entire lives. As James states regarding this amazing practice, "As an account of human adaptability, these practices cannot surely be bettered" and that "the social practices of the Inuit raise important questions about the cultural shaping of social identity and of gender socialization in particular."

Other important chapters include those regarding gender identity disorder and suicide risk and gender identity disorder and eating disorders. Zucker discusses comorbid symptom patterns associated with gender identity disorder in children. The chapter by Brain, concerning biological contributions to atypical gender identity, is a broad review of research in this area. Di Ceglie provides a comprehensive review regarding management and therapeutic aims in working with children and adolescents with gender identity disorder and their families.

This is followed by several chapters of case illustrations. With one exception, I found these to be excellent. The exception was a case about an adolescent girl who "wants to become a man." Here a patient is described who, from age 2, manifested her cross-gender identification in many ways. Seen now in adolescence, the patient is consistently masculine and discusses her unhappiness at the fact that she is female. The author describes an approach to the clinical picture that does not seem to include an acknowledgment that these findings are consistent with typical female-to-male transsexualism. For example, at one point, the patient says that she would wish to have her breasts cut underneath and emptied so that, with summer approaching, she would be able to take her jacket off and her body would not show the shape of her breasts. The author describes various interpretations of the meaning of this patient's wishes and reports that she ended the analysis prematurely. It is stated that "The final theme of her analysis was the breast: she again planned to have her own emptied, as the first step of her sex change surgical procedures, and she expressed her dislike of the big breasts of women who are either pregnant or feeding. I have no doubt that her fantasy was of attacking me, as the feeding breast, in a total way" (p. 227). How the author arrived at this idea or what his young patient thought of this remarkable interpretation is not recorded. The rest of the case report is similar.

In my view, the general approach as I understand it from the case report is clinically unhelpful. Typically, adolescents experience increased suffering as their bodies change in the direction opposite to their irreversible gender identity. The embarrassment female-to-male transsexuals experience as their breast enlarge is typical of the condition. Despair and depression is not uncommon. These individuals are, as a general rule, deeply appreciative of any clinician who is able to recognize the life-long nature of their cross-gender identification and to be emotionally supportive and understanding of their wish to eventually live as members of the sex opposite from their birth sex.

This book also contains an excellent glossary and an appendix that includes a guide for the management of gender identity disorders in children and adolescents, as prepared by the Royal College of Psychiatrists. All clinicians and researchers who are involved in any way with issues of atypical gender identity will find this book of great value.

Changer de Sexe. *By Colette Chiland.* Éditions Odile Jacob, Paris, 1997, 282 pp., 130 F.

Reviewed by Marilyn Wilchesky, Ph.D.⁷

This book describes the whole spectrum of sex and gender change from prismatically sectioned different

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perspectives, while at the same time, the author accompanies the reader through the maze of history, philosophy, and science on this topic. The tone is determined from the Introduction, in which the transsexual phenomenon is called a product of our technical and individualistic culture. Chiland suggests her preferred method for relieving the suffering of those suffering from gender dysphoria: rather than changing the body, why not change what is in the head of the individual?

There is a rich description of mythology and a cross-cultural survey of those who do not fit in the binary male–female categories and, indeed, in which some such "misfits" in our culture have a revered status. In some of these cultures, the in-between sex constitutes a special social status, with supernatural powers, whereas the transsexual in our own culture is an error of nature, a marginalized anomaly. After tracing the historical path of gender identity disorder, Chiland quotes North American authors from Harry Benjamin in 1966 up to our contemporaries.

The clinical material presented is from the author's analysands, such as the male transsexual who talks of having a male body and the spirit (âme) of a woman, which gives rise to a philosophical discussion on whether a soul has a gender. Chiland discusses the anguish of the gender dysphoric person's predicament and also the therapist's, for whom it is not clear whether to address the person in their assigned gender or the wished for gender.

According to Chiland, the fact that hormonal therapy and surgical techniques have been able to physically reassign gender dysphorics does not necessarily mean that complete gender reassignment has been achieved. She regrets that few rigorous follow-up studies have been carried out to see whether treatments offered have any effectiveness. It was not clear from earlier studies whether psychological treatment was individual, group, family, psychoanalytical, behavioral; or whether in the case of a child, whether the parents were involved; or whether these therapies were consistent. In general, these follow-up studies are also inconclusive in that men and women have often been lumped together, there are no control groups, and the length of follow-time is not clear.

Chiland asks if there really is such a thing as a transsexual child. Her first experience was with a 4-year-old boy who wanted to be a girl. This was a textbook case of an absent father and a depressed mother, who was herself a tomboy as a child, and who was in a blissful symbiosis with her son. The boy (and others subsequently) drew a picture of an idealized woman rather than of his own mother who was somewhat masculine in appearance. Chiland views this as an internal construct of the idealized woman.

In Chiland's view, any adolescent who wants to change gender is, in fact, an ego-dystonic homosexual.

The point is made that for both genders, it is more salient for the person to *be* the other sex, rather than *not be* the sex or gender in which he or she was born or assigned. Even in this book review, there is an intrinsic difficulty in that the French word "sexe" includes both the English words sex *and* gender.

We are exposed to the enormous difficulties and inconsistency in changing civil status in France. The politics have been inflexible on the part of the lawmakers, and Chiland describes the irony of allowing sex-reassignment surgery (SRS), declared a medical condition in France in 1992, yet not allowing a change of civil status. She notes that some of the states in the United States as well as some of Canada's provinces are equally inconsistent. The argument is made that a person should be allowed to change gender role and be permitted to have legal civil status of that role without having to go through SRS or other physical changes. This, of course, is the exact antithesis of the attitude with which we are familiar.

Etiology of the syndrome is described as being a pathological distortion of development; being rooted in narcissism or, at best, borderline personality with strong narcissistic features. The dominant defense of the transsexual is that of denial: he or she does not see his or her mutilated body as his or her real body.

In terms of treatment philosophy, Chiland proposes long-term treatment for gender-disturbed children to avoid having to consult for SRS as adults. For adults, she would prefer to change the person's way of feeling about their given gender rather have them go through technical external changes. She does give credence to benefits from the whole package of long-term psychotherapy, hormone and surgical reassignment, and change of civil status. Couple life and sexuality after reassignment is varied; those who choose to live with a partner want to have a "normal" life. Chiland argues that there is a discrepancy here because normal couples were made to reproduce. However, psychotherapy with transsexuals is difficult at best, in view of their resistance to the process, and of the difficulty of navigating countertransference, such as the male therapist being bombarded by his male patients' castration demands. Her thesis that a male-to-female's conception of a woman is that of a castrated man and it is that to which he aspires. Yet this is in direct opposition to her belief that it is more important to become the other sex, rather than to take flight from the assigned sex.

Chiland uses words rooted in religion (e.g., "transgression," "death of God") to describe her views of allowing SRS, because it ultimately will disorganize laws, ethics, families, and society at large. She wonders if humanity can exist without sex differentiation and feels impotent to stop it.

This beautifully articulated book is different from recent sterling works on the subject that deal with the etiology, treatment, clinical aspects, and historical surveys and outcome studies. It deals with all these aspects from a highly personal perspective. Chiland is a philosopher, psychiatrist, psychoanalyst, and teacher, and each of the these aspects of the author's background permeates the writings as she shares her struggle with the reader on the philosophy and ethics of relieving the transsexual's suffering by changing the external image rather than the internal being.

I found it informative on the state of the art in France, on the specific psychoanalytic treatment used by the author, and the extensive chapter on cross-cultural prevalence of gender identity disorder. The ethical problems resonated loudly in the reviewer. It was refreshing to learn of a clinician who tends to slow the galloping trend to hand out a quick fix to this complex group of dysphoric individuals.

Gender Loving Care: A Guide to Counseling Gender-Variant Clients. *By Randi Ettner.* W. W. Norton, New York, 1999, 196 pp., \$25.00.

Reviewed by Blaine R. Beemer, R.N.⁸

Ettner's slim volume is billed as a comprehensive guide to the treatment of gender dysphoria. Following on the heels of an earlier book (Ettner, 1996), which was directed more to the consumer, the current book is aimed more toward professional caregivers.

Ettner, a psychologist, provides a historical context for both the phenomenon of transsexualism and its treatment. She makes a reasonable case for the assertion that gender variance is not necessarily a new phenomenon and not exclusively an artifact of modern society. She thoroughly makes the distinction between gender problems and sexual object choice. There is a section on the early history of treatment in the United States. Another chapter describes incidence rates for gender identity disorders. She has included the most recent revision of the Harry Benjamin Standards of Care, which is a great service.

Ettner takes great pains to emphasize that gender dysphoria is a legitimate phenomenon and that sufferers deserve dignity and compassion. She clearly connects intensely with the lives of her patients and much of the book is composed of correspondence from gender dysphoria sufferers. Her message urging acceptance and support of

the varieties of gender expression is unambiguous and the pages abound with descriptions of transgendered patients' triumphs despite the unfeeling and reactionary efforts of ignorant therapists and the paranoia of modern society. As in her previous book, it is not hard to tell who she perceives to be good and who she considers bad.

Ettner certainly is not shy about making strong statements. On the opening page, Ettner states that gender dysphoria is not a mental illness, as if this is a common and proven point of view, and the book as a whole suggests that controversy about the taxonomy of gender dysphoria lies in the past. "Gender conditions...appear to be lifelong" (p. 111). Are all manifestations lifelong? She states that transsexuals should really be treated only by professionals who "understand the nature of gender conflicts" (p. 69), again as though all significant questions about gender dysphoria had been settled by specialists long ago. Having been part of the group that hosted the 1997 meeting of the Harry Benjamin International Gender Dysphoria Association, it is my observation that assessment and treatment of gender dysphoria is still a very new science and craft and there is a considerable lack of unanimity regarding some major issues, including causality and the relationship of gender variance to other psychological problems.

Ettner has clearly settled in her own mind that "gender variance" is a result of prenatal biochemical influences. The tone of her argument would suggest to a naïve reader that a study by Zhou, Hofman, Gooren, and Swaab (1995) has provided closure by identifying a biochemical cause of transsexualism. Although the results of these types of studies are tantalizing, biochemical and anatomical research in this area has been notoriously difficult to replicate, their interpretation is still actively debated, and other explanations for some manifestations of gender dysphoria, including the purely psychological, cannot be confidently discarded at this time. A more balanced approach requires that the author acknowledge this ongoing debate and thoroughly include contrasting arguments.

Leaning so heavily on a biochemical theory to explain the etiology of gender dysphoria raises a number of questions that I would have hoped the author would address. For instance, while the author posits that transsexualism and transvestic fetishism are separate categories with separate causes, the history of many cross-dressers often shows far more cross-gender identification than previously thought (Doorn, Poortinga, & Verschoor, 1994). Also, what does it mean when an individual resolves his/her gender dysphoria through counseling? Some people certainly seem to identify their gender dysphoria as symptomatic of something else even after previously expressing absolute certainty that they are transsexual. It is the knowledge of these types of situations that causes

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many thoughtful therapists to maintain a healthy caution about the rationales for their interventions.

The author resolutely steers away from any hint that gender patients may exhibit pertinent personality pathology (I could not even find the words "personality disorder," except MPD, in the text). On page 106, Ettner employs a quotation (which appears to speak for the author) that borderline personality organization is nothing but the effect of deep, lifelong shame. Although shame clearly is a huge factor in the lives of many gender dysphoria sufferers, the author's position in this regard is very much on one end of the continuum of opinion (some might even say it is an extreme position) and the reader might be better served if the author had made more effort to delineate where her viewpoint places her relative to others in the field.

The possibility of a significant linkage (aside from mere coexistence) between gender dysphoria and other personality disorders is more than a theoretical consideration for counselors. Regardless of the cause—shame, borderline personality, life tragedies, whatever-gender patients sometimes present with behaviors that complicate counseling: regression, acting out, rage, depression, splitting, and so on. Patients may constantly challenge boundaries and counselor-patient enmeshment is not uncommon. Ettner does not mention these possible consequences of the therapeutic interaction, common as they are in many practitioners' experience. A comprehensive work on counseling gender dysphoria sufferers needs to address these possibilities explicitly. It is important because some counseling approaches are safer and more compassionate with individuals who exhibit those propensities and alertness by the therapist can reduce the inadvertent harm.

There are a number of particularly thorny issues in this field and I was hoping that the author would discuss them. How does she feel about the value and staging of the Real Life Test (RLT) and how does monitoring the RLT affect the therapeutic relationship? How does Ettner respond to the "coached" patient who embellishes their history to gain access to hormones? How does one counsel gender patients in the prison setting? What is her approach to post-transition regret or postsurgical regret, uncommon as it is? How does she account for the huge (10-fold) variability in incidence of gender disorders identified in the studies she presents and what is the basis for her assertion that 10% of the general population may be gender dysphoric? Perhaps in a later work she can provide her perspective on these matters.

This book is permeated with compassion for the transgendered and compassion is necessary for any counseling situation. Ettner's book is a work as much about advocacy as it is about counseling: advocacy for the dignity of the client, for access to treatment, for a more ac-

cepting society, for the quite humanistic need of people to follow their own star. I agree substantially with these goals. But sometimes the author stretches the thin fabric of scientific evidence to smooth over the many contradictions that research in this area presents. The author does not sufficiently deal with evidence that might complicate her scientific position and the description of what to expect when counseling this population seems more designed to advance an advocacy position than to prepare counselors for some common challenges presented by the patients. Professionals who may take a more clinical approach are not necessarily uneducated or uncompassionate and their stance does not prevent them from effectively delivering care. Even gender specialists are still feeling out their way in many respects. True open-mindedness, and an ongoing acceptance of the formative nature of our work, is the most realistic face to present to the nonspecialist counseling community.

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Sex, Gender & Sexuality: 21st Century Transformations. *By Tracie O'Keefe*. Extraordinary People Press, London, 1999, 353 pp., £13.99.

Reviewed by Randi Ettner, Ph.D.9

This book, despite its ambitious title, jacket review, and sheer magnitude, is most serviceable for students and lay persons who are struggling with questions of sex and gender and want to delve further into these areas. It reads quickly and can serve as a point of departure for more intensive investigations, particularly with the valuable contributions from Whittle and others. Perhaps a more circumspect title would have been appropriate, as the book relies more heavily on personal opinion, albeit informed, than scientific information. Approximately one third of the book is a compendium of the collected works of O'Keefe and another third is "stories and interviews."

⁹New Health Foundation, 1214 Lake Street, Evanston, Illinois 60201.

There is a factual error in the book in a discussion of "fifth brain sex." O'Keefe states:

The size of each part of the brain varies from sex to sex and person to person and some men have female brain characteristics while some women have more male brain characteristics. This can be seen through the published work of Gooren and Gorski, who have both identified behaviour-determining regions of the brain that are related to sex. (p. 32)

This interpretation of scientific data suggests that each part of the brain is sexually dimorphic, which is not the case. Only a small minority of the brain has been demonstrated to be dimorphic; the vast majority of the brain is volumetrically similar across sexes. Furthermore, I could not find any mention whatsoever of reference to the Zhou, Hofman, Gooren, and Swaab (1995) landmark study that O'Keefe alludes to.

Also troubling is the author's categorical indictment of psychiatry and psychiatrists. At best, this is unfair; at worst, provocative. It certainly diminishes the work of many dedicated practitioners who have helped countless sex-and-gender-variant persons embrace self-acceptance.

O'Keefe has been successful in promoting awareness of the complexities of sex and gender and their impact on identity formation. She is acutely aware of the overarching role of cultural and societal impact on the aforementioned constructs. She is a relentless enemy of prejudice against, and pathologizing of, individuals who exhibit diversity. For this, she is to be praised.

I regret that this book did not include more substantive scientific material to buttress the noble truths the author puts forth and provide balance and thoroughness. For had she done so, this book would attract a larger audience, including practitioners in these and related fields, and researchers. With only 91 published references for over 300 pages of text, there is scant that is new here, in an area with a burgeoning body of psychosocial and neurobiological knowledge.

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